

RH 7/29/14

TRANS

State of North Carolina  
Department of Environment and Natural Resources  
Division of Waste Management

TRANSFER STATION  
Facility Annual Report  
For the period of July 1, 2013-June 30, 2014

According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2014 and a copy of this report must be sent to the County Manager of each county from which waste was received. If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist.

Facility Name: Sanford Transfer Station

Permit: 5305-TRANSFER-2013

Physical Address		Mailing Address	
Street 1: 3290 McDonald Road		Street 1: 4621 Marracco Drive	
Street 2:		Street 2:	
City: Sanford	County: Lee	City: Hope Mills	
State: North Carolina	Zip: 27332	State: North Carolina	Zip: 28332

  

Primary Facility Contact Person		Billing Contact Person	
Name: Ted Habets		Name: Ted Habets	
Phone: (910) 423-4122	Fax: (910) 423-4125	Phone: (910) 423-4122	Fax: (910) 423-4125
Email: ted.habets@wasteindustries.com		Email: ted.habets@wasteindustries.com	

1. Tipping Fee: \$59.00 per Ton (Attach a schedule of tipping fees if appropriate.)  
Does the tip fee above include the \$2.00 Solid Waste Tax? ☒ Yes ☐ No
2. Did your facility stop receiving waste during this past Fiscal Year? ☐ Yes ☒ No  
If so, please report the date this occurred: \_\_\_\_\_
3. Are there SWANA or other certified operator(s) at this facility? ☒ Yes ☐ No  
If yes, indicate the following:
- Name: LeRoy Hatmaker Certification type and expiration date: Transfer Station Operations Specialist Oct. 19, 2016
- Name: Christy Barns Certification type and expiration date: Transfer Station Operations Specialist June 22, 2015
- Name: Chuck Gabbis Certification type and expiration date: Transfer Station Operations Specialist Nov. 29, 2015
4. What other activities occur at this facility? (check all that apply)
- ☐ Recycling/Reuse Collection ☐ Scrap Tire Collection ☐ White Goods Collection ☐ Household Hazardous Waste Collection
- If you checked Recycling/Reuse Collection, please indicate the materials accepted and amount collected: (check all that apply and provide tonnages)
- ☐ Carpet \_\_\_\_\_ tons ☐ Concrete/rubble/asphalt \_\_\_\_\_ tons ☐ Gypsum/drywall \_\_\_\_\_ tons ☐ Other Metal \_\_\_\_\_ tons
- ☐ Cardboard \_\_\_\_\_ tons ☐ Shingles \_\_\_\_\_ tons ☐ Electronics \_\_\_\_\_ tons ☐ Other Plastic \_\_\_\_\_ tons
- ☐ Wood \_\_\_\_\_ tons ☐ Other (specify) \_\_\_\_\_
5. Provide the four quarterly tonnages this facility reported on NC E-500K forms between July 1, 2013 and June 30, 2014:

Quarter	Tons Reported
July 1 - September 30	0
October 1 - December 31	0
January 1 - March 31	0
April 1 - June 30	3,703.14
Total	3,703.14

6. Total waste received (INCLUDING WASTE TRANSFERRED AND RECYCLED) at this facility during the period of July 1, 2013, through June 30, 2014. Indicate **tonnage** received by COUNTY of waste origin. Please indicate COUNTY and STATE, if received from another state.

Received from	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total
Bladen	0	0	0	0	0	0	0	0	0	0	0	0	0
Columbus	0	0	0	0	0	0	0	0	0	0	0	0	0
Cumberland	0	0	0	0	0	0	0	0	0	0	0	0	0
Duplin	0	0	0	0	0	0	0	0	0	0	0	0	0
Harnett	0	0	0	0	0	0	0	0	0	0	0	1.44	1.44
Hoke	0	0	0	0	0	0	0	0	0	0	0	0	0
Johnston	0	0	0	0	0	0	0	0	0	0	0	0	0
Lee	0	0	0	0	0	0	0	0	0	0	1,535.87	2,057.03	3,592.9
Moore	0	0	0	0	0	0	0	0	0	0	96.6	0	96.6
Richmond	0	0	0	0	0	0	0	0	0	0	0	0	0
Robeson	0	0	0	0	0	0	0	0	0	0	0	0	0
Sampson	0	0	0	0	0	0	0	0	0	0	0	0	0
Scotland	0	0	0	0	0	0	0	0	0	0	0	0	0
Chatham	0	0	0	0	0	0	0	0	0	0	0	12.2	12.2

7. Indicate the facility(s) that received your facility's transferred waste material: Grand Total **3,703.14**

NAME, PERMIT #, and LOCATION (city, state) of FACILITY	Facility Type	Tons
Sampson County Disposal, LLC (Permit # 82-02) Roseboro, NC	MSW Landfill	3,703.14
<b>TOTAL</b>		<b>3,703.14</b>

**REMINDER:** According to (G.S. 130A-309.09D(b)), this report must be sent to the Regional Environmental Senior Specialist for your area and a copy of this report must be sent to the County Manager of each county from which waste was received.

Please return your completed report to:

Robert Hearn  
1646 Mail Service Center  
Raleigh, NC 27699-1646  
phone: 919.707.8292 email: Robert.Hearn@ncdenr.gov

CERTIFICATION: I certify that the information provided is an accurate representation of the activity at this facility.

Signature: Ted Habets Date: 7/3/17

Name: Ted Habets Title: General Manager

Phone Number: (910) 423-4122 Email: ted.habets@wasteindustries.com